



JUN 30 2005 08:10am From-MOTOROLA

18475763750

T-530 P.004/004 F-701

BEST AVAILABLE COPY

REVOCATION OF POWER OF ATTORNEY AND APPOINTMENT OF NEW POWER OF ATTORNEY

Application Number	09/903,784
Filing Date	07/13/2001
First Named Inventor	Aroon et al.
Art Unit	2826
Examiner Name	Fazli Erdem
Attorney Docket Number	JG00360

As assignee of the entire interest of the above-identified application or patent by virtue of an executed Assignment, recorded in the U.S. Patent and Trademark Office on 07/13/2001, under Reel/Frame - 011985/0927.

I hereby revoke all previous powers of attorney given in the above-identified application:

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners at Customer Number : 22917

Please change the correspondence address for the above-identified application to:

The address associated with Customer Number: 22917

SIGNATURE of Assignee of Record

Name	Jonathan P. Meyer
Signature	
Title	Senior Vice President and Director of Patents, Trademarks & Licensing
Date	6/28/05

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

* Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

**MOTOROLA****FAX TRANSMITTAL SHEET**

Motorola, Inc.
Intellectual Property Section
Law Department
1303 E. Algonquin Road
Schaumburg, IL 60196

Telephone: (847) 576-5219
Facsimile: (847) 576-3750

2

Number of Pages (including this page)

BEST AVAILABLE COPY

Date: June 30, 2005
To: ISSUE FEE
Location: United States Patent and Trademark Office
Fax No.: (703) 746-4000
From: James A. Lamb, Reg. No. 38,529

NOTICE: This facsimile transmission may contain information that is confidential, privileged, or exempt from disclosure under applicable law. It is intended only for the person to whom it is addressed. Unauthorized use, disclosure, copying or distribution may expose you to legal liability. If you have received this transmission in error, please immediately notify us by telephone (collect) to arrange for return of the documents received and any copies made. Thank you.

MESSAGE:

Enclosed herewith, please find PTOL-85 ISSUES FEE TRANSMITTAL and REVOCATION OF POWER OF ATTORNEY AND APPOINTMENT OF NEW POWER OF ATTORNEY for filing in the below-identified application.

EXAMINER:	Fazil Erdem
GROUP ART UNIT:	2826
SERIAL NO.:	09/903,784
FILED:	07/13/2001
INVENTOR:	Aroon et al.



BEST AVAILABLE COPY

		Application Number	09/903,784
		Filing Date	07/13/2001
		First Named Inventor	Aroon et al.
		Group Art Unit	2826
		Examiner Name	Fazli Erdem
Total Number of Pages in this Submission		Attorney Docket Number	JG00360

TRANSMITTAL FORM		ENCLOSURES (check all that apply)	
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition: to Correct Filing Receipt <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below) <ul style="list-style-type: none"> <input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> RCE <input type="checkbox"/> Copy of Notice to File Missing Parts <input checked="" type="checkbox"/> Issue Fee Transmittal
		Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	JAMES A. LAMB	Registration No.	29,420
--------------------	---------------	------------------	--------

Signature	
-----------	--

Date	6/27/2005
------	-----------

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted at fax number (703) 872-9306 to the United States Patent and Trademark Office, Washington, DC 20231 on the date listed below:

Typed or printed name	Debbie Healy
-----------------------	--------------

Signature		Date	6/30/05
-----------	--	------	---------